

ISSUE SLIP STATE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	WAW TRUONG		06-21-01
O.I.P.E. CLASSIFIER		12	7/6
FORMALITY REVIEW	R.D	1121	8-27-01
RESPONSE FORMALITY REVIEW	M.D	625	11-26-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	✓
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25	✓
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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 11/28/11